

APPLICATION FOR ELECTRICAL PERMIT

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COUNTY OF LOS ANGELES
 DEPARTMENT OF COUNTY ENGINEER
 BUILDING AND SAFETY DIVISION
 JOHN A. LAMBIE, COUNTY ENGINEER
 COLEMAN W. JENKINS, SUPT. OF BUILDING

FOR APPLICANT TO FILL IN

RECEPTACLE	TOTAL OUTLETS	FIRST 20	NO. EACH	EACH	FEE
2 LIGHT	9	9	9	\$.20	\$ 1.80
2 SWITCH		ADD'L OVER 20		.10	
LIGHTING FIXTURES	2	2	2	.20	40
		ADD'L OVER 20		.10	
RANGES	CLO. DRYERS	WTR. HTRS.		1.00	
GARB. DISP.	STA. COOK				
DISHWASH.	AUTO.-WASH.				
SPACE HTRS.	STA. APP. (1/2 H.P. MAX.)			.50	
MOTORS:	OVER	NOT OVER	H.P.		
	0	1			1.00
	1	3			1.50
	3	8			2.00
	8	15			2.50
	15	50			3.00
	50	100			5.00
SIGNS:	NO. TRANS.				
	NO. LAMPS				
SERVICE 0-600V-NOT OVER 200A				1.00	
SERVICE 0-600V-OVER 200 A.				2.00	
SERVICE OVER 600V				5.00	
OTHER (SEE COMPLETE FEE SCHEDULE)					
PERMIT ISSUING FEE			2.00		2.00
SUPPLEMENTARY PERMIT ISSUING FEE			1.00		
TOTAL FEE				\$	4.20

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN, THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE *R. T. Smith*

BUILDING ADDRESS *3615 THORNDALE*
 LOCALITY *PASADENA*
 NEAREST CROSS ST. *ROSEMEAD*
 OWNER *HAMMOND*
 MAIL ADDRESS *SAME*
 CITY _____ TEL. NO. _____
 CONTRACTOR *AERO ELECTRIC Co.*
 ADDRESS *3529 MIRIAM DR.*
 CITY *W. COVINA* TEL. NO. _____
 STATE _____
 LICENSE NO. *210133*

DISTRICT NO. *3.5* GROUP *I* ZONE *R-1* PROCESSED BY *Edson*

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDERSLAB WORK		
ROUGH CONDUIT	<i>10/28/65</i>	<i>Carland</i>
WIRING	<i>9/21/66</i>	<i>Carland</i>
FIXTURES		
POWER		
UTILITY CO. NOTIFIED	<i>9/21/66</i>	<i>Carland</i>
FINAL		

VALIDATION

CK MO CASH

JOSEPH C. ROOHAN
 SUPERVISING ELECTRICAL ENGINEER

LAG 59443 OCT 19 2

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Edson

INSPECTOR COPY